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Before the Aging Committee

**In Support of HB 5194 AN ACT CONCERNING REGISTRATION OF TEMPORARY NURSING SERVICES AGENCIES.**

Good Afternoon, Senator Miller, Representative Garibay, and members of the Committee, my name is Nethania Garin and I have worked as an LPN for the last three years. I love my job because it is important to me that I advocate for my patients and give them the sense of being loved and wanted. I love being able to restore their spirit and give them the motivation or push they need to keep moving forward. It's wonderful when I get to see them achieve their goals and obtain their happiness no matter what they have gone through. As an LPN, I provide everything I am asked to provide whether it be providing care, assistance with transfers, obtaining orders from their MD, mental health support, and many other things. Thank you for the ongoing effort to allocate funds to Nursing Homes. In addition to funds, we need regulation of staffing agencies, including the creation of a staffing agency registry.

The pandemic has exposed just how dire the staffing situation in nursing homes has become. We are incredibly understaffed even with the advances that we made last year, and our nursing homes refuse to hire more full-time workers. Instead they have become increasingly reliant on workers from staffing agencies. The staffing agencies also pay higher wages and provide comparable benefits, if not better: Paid time off, holidays, health insurance, dental, vision, etc. Agency LPNs get paid up to \$40.00 per hour. By contrast, as an LPN I only get paid \$26.66 per hour by the nursing home. That is about how much a CNA gets paid by a staffing agency. Naturally, workers tend to gravitate toward staffing agencies, and that further exacerbates the staffing shortages in nursing homes.

Short staffing means that I am unable to dedicate long hours of my time to help improve my patients well being. It means doing jobs outside our job description that we don't get paid for. It means missing my meal breaks because I have to help the CNAs on my team and make sure that my patients are properly being taken care of. It means not being able to take time for myself, or to spend with my family. It means having to cry in the supply room for two minutes and then put on a smile and try to be positive throughout the entire shift just for the well being of my fellow colleagues and patients.

Our residents are cared for by staff whom they trust and open up to. Whether it be the LPN or CNA, they confide in all of us and trust us to attend to their needs and to also help them feel at ease during their stay. Because of short staffing, management is using staffing agencies to cover shifts that should be taken by a full time worker. Sometimes, staffing agency nurses and CNAs are no call no show or they show up and don't do their job. And even when they do show up, we cannot be sure that they are properly trained or qualified, or that they can be completely trusted. The compromised quality of care and compromised continuity can be incredibly dangerous. One patient in our facility died because she was under the care of an RN from a staffing agency and the patient's oxygen concentration fell to 50% when it should have been 95% or higher. The patient tragically died of asphyxiation. Fortunately the family did not pursue legal action. But

this was still a grave oversight and likely would not have happened under the care of the full-time LPN who normally cared for the patient in question. Agency workers don't know our residents the way we do.

It's frustrating to have to clean up after agency staff and then get blamed for their errors on your shift. There is no accountability. The staffing agencies still get paid. The staffing agency workers still continue to be hired even after everything that happens. Regulation of staffing agencies, including a staffing agency registry, would help mitigate these problems. I urge you to support HB 5194. Lives are literally at stake.

Thank you for your time.